

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MIG		1/5/99
O.I.P.E. CLASSIFIER		10	1-7-99
FORMALITY REVIEW	109833		1/19/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1	✓ 1/22/99
2	
3	
4	
5	
6	
7	
8	
9	
10	✓
11	
12	✓
13	
14	
15	
16	
17	
18	
19	✓ ✓ ✓ ✓
20	0 0 0 0
21	✓ ✓ ✓ ✓
22	✓ ✓ ✓ ✓
23	
24	
25	
26	
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30	
31	
32	
33	
34	
35	
36	
37	
38	
39	
40	✓
41	
42	
43	
44	
45	
46	
47	
48	
49	
50	✓

Claim	Date
Final	
Original	
51	✓ ✓
52	
53	
54	
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57	
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59	
60	
61	
62	
63	
64	
65	
66	
67	
68	
69	✓ ✓ ✓ ✓
70	
71	✓ ✓ ✓
72	
73	
74	
75	
76	
77	✓ ✓ ✓ ✓
78	0 0 0 0
79	0 0 0 0
80	✓ ✓ ✓ ✓
81	✓ ✓ ✓
82	
83	✓ ✓ ✓
84	
85	
86	
87	
88	
89	✓ ✓ ✓
90	0 0 0 0
91	0 0 0 0
92	✓ ✓ ✓
93	=
94	
95	
96	
97	
98	
99	
100	✓

Claim	Date
Final	
Original	
101	✓ ✓
102	
103	
104	
105	
106	
107	
108	
109	✓
110	0
111	0
112	✓
113	✓
114	
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BEST AVAILABLE COPY If more than 150 claims or 10 actions
staple additional sheet here